INSTRUCTIONS FOR FILLING OUT COMPLAINT FORMS

A complaint against a licensed contractor <u>must be filed in writing within two years</u> from the date of occupancy or discovery of defect, whichever comes first, or from the date the work was last performed for the Registrar of Contractors to have jurisdiction.

The official complaint form is divided into six groups. Each of these is important to the processing of the complaint. List only one contractor per complaint form. File a separate complaint form for each contractor involved. Please read carefully and follow the instructions below. If you have any questions or require clarification, please call the nearest Registrar of Contractors office.

1. AGAINST

- a) The name under which the contractor conducts business, e.g.: XYZ Const. Co. List only one contractor. A separate form is required for each contractor involved.
- b) The contractors Registrar of Contractors license number, the business phone number of the contractor, include area code.
- c) The business address of the contractor; including city, state and zip code.

2. FILED BY

- a) Your name.
- b) Fill in <u>ONLY</u> if you are filing on behalf of a company, the company's name. Include your license number if you are licensed by the Registrar of Contractors. IF FILING ON BEHALF OF A HOMEOWNER'S ASSOCIATION, PLEASE CALL US FOR ADDITIONAL INSTRUCTIONS.
- c) The address, city, and zip code to which you want correspondence sent.
- d) Your phone number and a phone number where you may be reached during business hours, include area codes.
- e) The address, city, state and zip code of the actual location where the work was done.
- f) The nature of the work for which you contracted, e.g.: remodeling, new home built, roofing, etc.

3. JOB INFORMATION

- (a) Was the work Residential or Commercial? Check the appropriate area.
- (b) Was a building permit secured for the work done?
- (c) Were there building plans for the work to be done?
- (d) The move in date or when you began utilizing the structure.
- (e) The last date the contractor actually performed any work.
- (f) Will we need special access to enter the community?

4. CONTRACT INFORMATION

- (a) Is this a new home? Check the appropriate area.
- (b) Was your contract written or verbal?
- (c) The date the contract was effective.
- (d) The total amount of the contract.
- (e) Has the contractor been paid in full?
- (f) If contractor was not fully paid, how much is owed?
- (g) Retain all original documentation for future use.
- 5. LIST THE ACTUAL PROBLEM AND THE REASON FOR YOUR COMPLAINT. Additional pages may be attached if needed. IT IS IMPERATIVE THAT ALL ITEMS BE LISTED IN THE INITIAL COMPLAINT. ANY ADDENDUM TO YOUR COMPLAINT MAY RESULT IN SIGNIFICANT DELAYS IN RESOLVING YOUR COMPLAINT. Enclose only photocopies of original documents. DO NOT enclose photographs, videotapes, audiotapes or items that may be required for any future civil or administrative proceeding. Any material submitted as a part of the complaint becomes a public record document and CANNOT be returned to you.
- 6. THE COMPLAINING PARTY(IES) MUST SIGN AND DATE THE COMPLAINT. If the complaint is filed on behalf of a company, the owner, partner or an officer must sign it. The complaint form WILL BE RETURNED TO YOU IF NOT SIGNED. Submit complaint with original signature only, NO COPIES OR FAXES ACCEPTED.

DO NOT WRITE ON REVERSE SIDE OF COMPLAINT FORM

INFORMATION ON DEPARTMENTAL PROCEDURE

- 1. Prior to filing a complaint, we strongly urge you to contact your contractor and advise them of your problems. Many complaints can be resolved by simply opening the lines of communications.
- 2. When both a general contractor and subcontractor(s) are used on a project, we recommend you consider filing a complaint against both the general contractor and any subcontractor(s) that you believe to be at fault. This procedure allows our office to investigate all complaints simultaneously to insure that the responsible party is ultimately held accountable. It also helps us to render a timely decision, otherwise, the filing of additional complaints at a later date may be required, which can cause delays and inconvenience.

Include in your complaint everything you want to be considered by the inspector. The inspector is limited to evaluating <u>only</u> those items listed in your complaint. **IT IS IMPERATIVE THAT ALL ITEMS BE LISTED IN THE INITIAL COMPLAINT. AN ADDENDUM TO YOUR COMPLAINT MAY RESULT IN SIGNIFICANT DELAYS IN RESOLVING YOUR COMPLAINT**. Verbal amendments to a complaint will only be accepted with the agreement of the contractor. Otherwise, all amendments must be in writing and presented prior to any jobsite meeting. You may want to make a copy for your files. Mail or take the complaint form(s) to the nearest Registrar of Contractors office.

- 3. When this office receives your complaint(s), it will be processed and a copy will be mailed to the contractor (if properly licensed by this agency) along with a letter advising them to contact you to attempt to resolve the problem. If the contractor is unlicensed, it will be assigned to our investigations department and referred to the appropriate prosecuting agency, providing that enough evidence can be found. A letter will be mailed to you with a copy of your complaint, an identification number and the name of the assigned inspector or investigator.
- 4. When an inspection is necessary, the inspector will schedule a meeting at the jobsite with you and the contractor(s). After this meeting the inspector will advise both the complainant and the contractor(s) by letter of the findings. If corrections are required, the letter will include a time period in which the work should be completed. Although over 80% of the complaints filed with this agency are resolved at this stage, the inspector's findings are only recommendations.
- 5. In the event that the complaint cannot be resolved after the inspector's recommendations have been issued and the time period has expired, either party may file a written request for a hearing. A legally binding order will then be issued after an administrative hearing before the Office of Administrative Hearings, a separate State Agency, at 602-542-9826 in Phoenix and 520-628-5488 in Tucson. The time required resolving a complaint may vary from a few weeks to several months depending on the nature of the complaint and the cooperation of the parties.
- 6. Every licensed contractor must post a bond. All residential contractors participate in the Recovery Fund. The filing of this complaint may allow you to seek judgement against the Recovery Fund through the Registrar of Contractors office. You may also file civil action against a contractor in addition to filing this complaint. One does not preclude the other.

COMPLAINTS FILED WITH THIS AGENCY ARE PUBLIC RECORD AND AS SUCH, SUBJECT TO REVIEW BY THE PUBLIC.

icense No.:	E USE ONLY - Correct Name of Contractor:			
lass:ype of Entity:tatus:		Assigned To:		
- Submit this form to PHOENIX OFFICE 800 W. Washington,6 th Floor Phoenix, AZ 85007 (602) 542-1525	Toll Free (wit 1-888-2	TUCSON REGIONAL OFFICE (within Arizona) 88-271-9286 ASE PRINT) TUCSON REGIONAL OFFICE 400 W. Congress, Suite 212 Tucson, AZ 85701-1311 (520) 628-6345		
1. COMPLAINT FILED AGAINST: a) CONTRACTOR:	PROCESSING YO	UR COMPLAINT	CAUSE DELAY	S WITH
b) License No.: ROC -		Daytime Phone: _(
c) Address:				
 COMPLAINT FILED BY: NAME: 				
b) COMPANY:			NSE NUMBER: ROC -	
(YOUR COMPANY NA C) MAILING ADDRESS: d) HOME PHONE: ()	ME IF FILING ON BEH.	ALF OF A COMPANY) CITY: DAYTIME PHONE: _(State:	ZIP:
e) E-MAIL ADDRESS: f) JOBSITE ADDRESS: g) TYPE OF WORK DONE:		CITY:		ZIP:
3. JOB INFORMATION: a) WORK WAS: RESIDENTIA b) BUILDING PERMIT: YE c) PLANS AND SPECIFICATIONS: YE d) MOVE-IN DATE:	COMMERCIAL NO S NO NO	 CONTRACT INF New Home Buil CONTRACT: DATE OF CONTRACT 		Verbal 🗆
e) Date Work Last Performed: .f) Is Neighborhood access restr			AID IN FULL: YES 🗖	No 🗖
5. STATE ITEMIZED COMPLAIN USE:	T BELOW. RETAIN A	ALL ORIGINAL DOCUM	MENTATION FOR Y	our future
Enclose COPIES of documentation in have additional complaints, <u>list them</u> 6. SIGN AND DATE COMPLAINT I VERIFY UNDER PENALTY OF BEST OF MY KNOWLEDGE AND	numerically on a separate FLAW THAT THE ALLEGA	sheet of paper).		
DEST OF WIT KNOWLEDGE AF	VD DELIEI.			
Signatur			Date	

This document is available in alternative formats for individuals with disabilities by contacting the ADA Coordinator: 602-542-1525; TDD 602-542-1588; Toll Free (within Arizona) 888-271-9286

(PLEASE PRINT OR TYPE IN BLACK INK ONLY)

5. STATE COMPLAINT BELOW (CONTINUED):

DO NOT WRITE ON REVERSE SIDE

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